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Bwrdd Iechyd Prifysgol Caerdydd a'r Fro Cardiff and Vale University Health Board

Executive Headquarters / Pencadlys Gweithredol

Woodland House Maes-y-Coed Road Cardiff CF14 4TT Ty Coedtir Ffordd Maes-y-Coed Caerdydd CF14 4TT

7 October 2019

Lynne Neagle AM Chair – Children, Young People and Education Committee National Assembly for Wales Cardiff Bay Cardiff CF99 1NA

Dear Ms Neagle,

Thank you for your request for information dated 6 August 2019.

Cardiff and Vale University Health Board welcomes the opportunity to provide information to assist the Children, Young People and Education Committee in the scrutiny of the Welsh Government draft budget for 2020-21.

We have attached the response to the individual bullet points in the annex sections to this letter.

Cardiff and Vale UHB has maintained an improvement focus on the CAMH services provided to our residents for a number of years. This is reflected in the increased resources provided to the CAMH service and the diversification of service provided, reflecting the differing needs of young people requiring either neuro developmental or full CAMHs support. This has also led to an improvement in waiting times.

For a number of years, the main CAMHs service supporting Cardiff and Vale residents was provided by Cwm Taf LHB. On 1st April 2019 the service provision was repatriated to Cardiff and Vale UHB, complementing neurodevelopmental and primary mental health services that have been developed in the home provider. The decision to repatriate CAMHs services was taken in order to support a single and co-ordinated management focus on the provision of the different strands of a comprehensive CAMH service and to promote closer working relationships between local primary and community care colleagues and services. This will be supported by a single point of access which we are in the process of implementing.

The period approaching the service repatriation caused some vacancy difficulties as staff were supported in their decisions to transfer to Cardiff and Vale UHB or remain

with their previous employer. This factor, combined with sustained increases in referrals, has contributed to a temporary decline in referral to assessment performance. However, the new integrated service has successfully recruited to its vacancies and improved performance is anticipated as 2019-20 progresses.

If you require any additional information, please let me know.

Yours sincerely,

L'Chadand

Bob Chadwick
DIRECTOR OF FINANCE

Information on individual Health Board spending on mental health services for children and young people in Wales for each of the last five years, including what percentage of the total LHB budget this represents, and in cash terms, how this compares to the level of spending on adult mental health services. Also, what is the spend on mental health services for children and young people is per child for each individual Health Board.

The table below details the sustained increase in resource provided for Cardiff and Vale UHB CAMHs provision since 2014-15. This shows that the annual expenditure per child has increased from £35 in 2014-15 to £61 in 2019-20. This is an increase of 74%.

Year	TOTAL CAMHs Expenditure per annum £000s	LHB Annual Allocation from Welsh Government spent on CAMH services %	Annual expenditure per child (0-17) on CAMHs Services £s	Expenditure on Adult Mental Health Services £000s	Total expenditure on Mental Health services including CAMHs £000s	% of Mental Health Expenditure deployed on CAMH services %
2014-15	3,531	0.48%	35.25	101,222	104,753	3.37%
2015-16	4,117	0.53%	40.95	102,519	106,636	3.86%
2016-17	5,559	0.67%	55.07	106,086	111,645	4.98%
2017-18	5,903	0.69%	58.21	109,540	115,443	5.11%
2018-19	5,933	0.68%	58.14	110,131	116,064	5.11%
2019-20	6,351	0.69%	61.17	114,039	120,390	5.28%

Table 1 – C&V UHB Expenditure on CAMH services 2014-15 to 2019-20

Information on individual Health Board spending in each of the following services in relation to mental health services for children and young people, including expenditure for each of the last five years (both out-turns and future predicted spend) on: Neurodevelopmental services, CAMHS crisis and out of hours care, Psychological therapies, Local Primary Mental Health Support Services (LPMHSS), Inpatient provision/ service development The table below details how the Cardiff and Vale CAMH service has developed service sub specialties to better target service to differing patient needs.

	Core CAMHs Services	Neuro- developmental Services	CAMHs Crisis and Out of Hours care	Psychological Therapies	Local Primary Mental Health Support Services	Inpatient Provision	TOTAL CAMHs Expenditure per annum
Year	£000s	£000s	£000s	£000s	£000s	£000s	£000s
2014-15	2,527	_	342	-	208	455	3,531
2015-16	2,570	13	420	-	213	900	4,117
2016-17	2,432	617	877	175	479	949	5,559
2017-18	2,539	623	886	178	567	1,109	5,903
2018-19	2,581	625	893	182	567	1,085	5,933
2019-20	2,631	729	938	153	768	1,132	6,351

Table 2 – Breakdown of C&V UHB CAMHs expenditure over differential service areas

Information on individual Health Board spending and provision of low level children's mental health services; the funding challenges for Health Boards in terms of focusing on prevention and how these are being overcome through service innovation; and details of any transformation, and/or other additional funding, the Health Board has secured in relation to the provision of low level children mental health services.

Cardiff and Vale UHB supports low level mental health through an open access 3rd sector commissioned service – The Emotional Well Being service.

Over recent years the requirement to focus on the delivery of the Part 1 Mental Health target for children has meant that the previous work supporting schools and other agencies has been diverted to assessment. Last year the UHB was successful in a bid for additional senior Mental Health staff to facilitate re-establishment of this approach. A further bid has been submitted and approved as part of this year's Mental Health Improvement fund which will both facilitate a new model for consultation and support and build on the preventative work through the development of School Health Nurse with a specific Mental Health remit.

Our developing model is attached in Appendix 2.

Within this model there is clear link to an embedded Mental Health worker in the Early Help services in both Local Authorities. A bid for these workers has been sent to WG to utilise the recent £200k Regional Partnership board allocation. This bid also contains a Third sector element specifically for parental support.

Any specific issues within individual Health Boards in relation to poor staff recruitment and retention that has an impact on spending on mental health services for children and young people, specifically, for each of the last five years, actual expenditure on agency staff (both the out-turns and predicted spend for 2020-21).

In terms of recruitment, since the repatriation of Specialist CAMHS the UHB has been very successful in recruiting to the vacant posts that were transferred and this team now only has 2 vacancies.

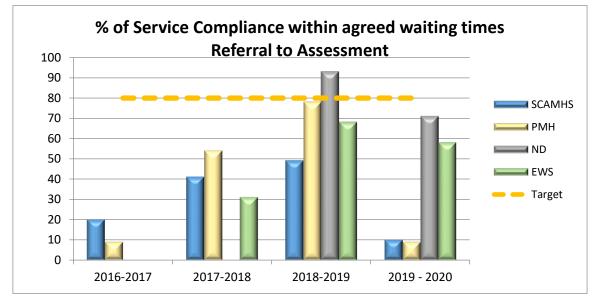
Recruiting to Primary Mental Health workers who are experienced to deliver part 1 assessments has been challenging but the new integrated service will provide more opportunities for career progression and we will be aiming to recruit and train band 5 staff.

Any specific comments individual Health Boards would like to make about how recurrent funding for mental health services for children and young people, as well as additional CAMHS improvement funding is allocated to Health Boards and how spend is tracked by Welsh Government, including details how Health Boards can evidence this funding is being used to drive forward improvements in mental health services for children and young people.

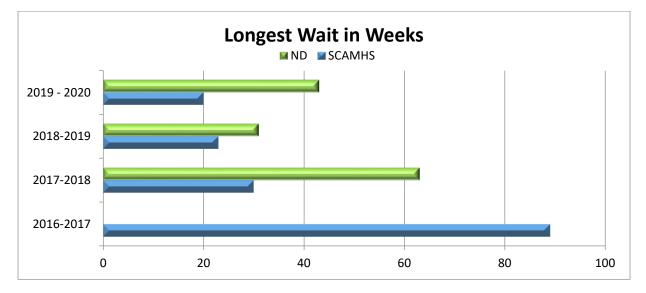
It would have been useful for this year's Mental Health allocation of additional funding to be split between younger persons and adult categories. In bidding for allocation C&V UHB had addressed Welsh Government priorities such as children and a whole school approach. The UHB was then asked for further assurance that the funding would help meet Part 1 performance in response to the Delivery Unit review of Primary Mental Health care which had been published after the submission of bids deadline. This has now been resolved and the UHB has provided the requested information. In future rounds it would be useful for organisations to know all the key objectives and criteria in advance of bidding processes so that these can be built into initial bids.

Appendix 1 – Trend in performance

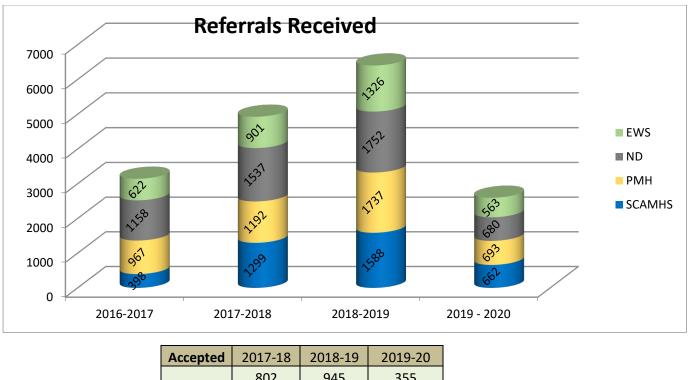
For individual Health Boards, details of the waiting times performance for first appointment and the start of treatment



EWS target is 5days, SCAMHS & PMH target is 28days and ND is 26 weeks



For individual Health Boards, details of the demand for mental health services for children and young people, and the number and percentage of referrals accepted into treatment.



SCAMHS	802	945	355
SCAIVINS	84%	89%	71%
ND		922	330
ND		53%	49%

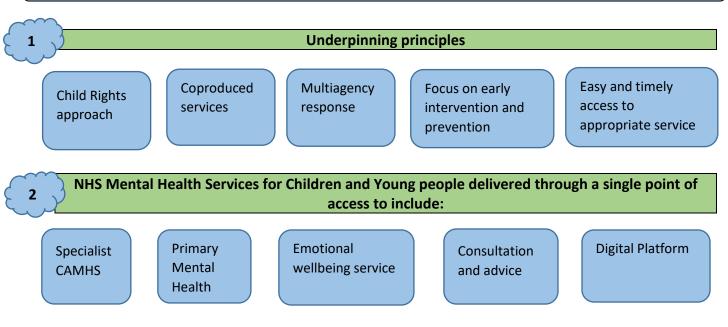
We currently only have acceptance data for SCAMHS and ND for the years shown in the table.

EWS and PMH will be reporting acceptance rates moving forward.

The 2019-20 data represents the period April 2019 to August 2019. Referrals to date in 2019-20 suggest that the increases seen in 2018-19 have been, at least, sustained.



Strategic Vision and Transformation for Emotional & Mental Health Services



Neurodevelopmental Assessment services which are delivered as a shared Community Child Health/SCAMHS model will also form part of the single point of access model.

Family Help and Support Services

Embedded mental health workers as part of the family advice and support services in Cardiff and Families First advice line in the Vale of Glamorgan providing support to the wider team. These will act as 'trusted referrers' to the NHS CAMHS services.

A locality wellbeing approach with skilled mental health workers providing consultation and advice and a conduit to NHS mental health services.

The locality model will work with Primary care, Schools, School Nurses, School counsellors, 3rd sector organisations, 'Not for profit' social enterprise and community assets to deliver early support and access to Mental Health NHS services if required

The locality approach will work in partnership with other services to provide consultation and advice. It will deliver training and development activity to support other services to identify early signs and highlight appropriate routes to access early help.

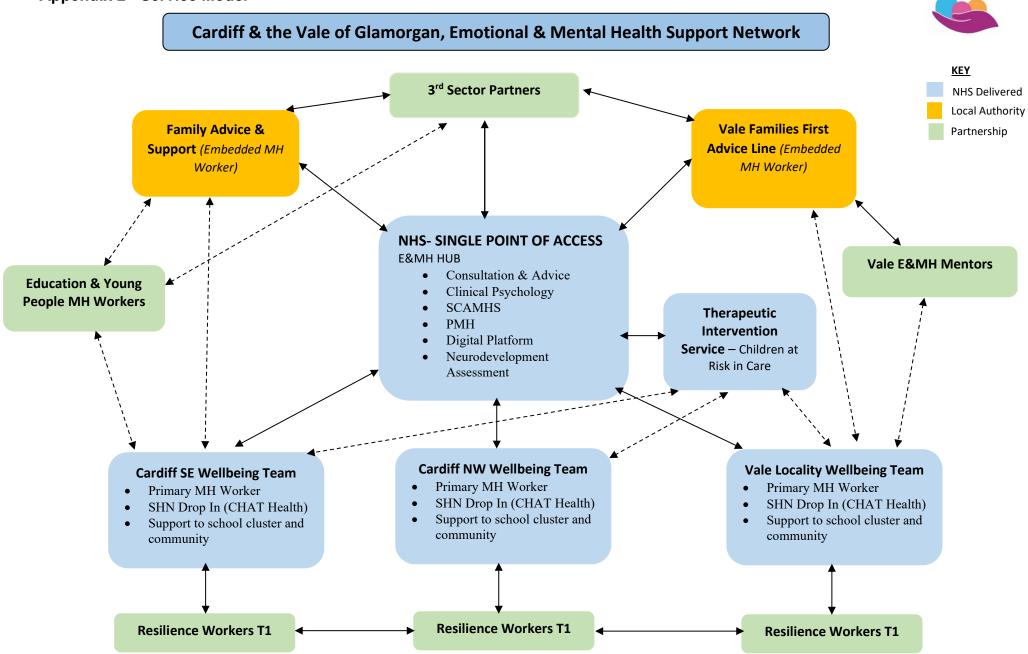
This model supports a whole school/community approach which respond to the 'Mind over Matter' report.

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Adverse Childhood/Developmental Trauma

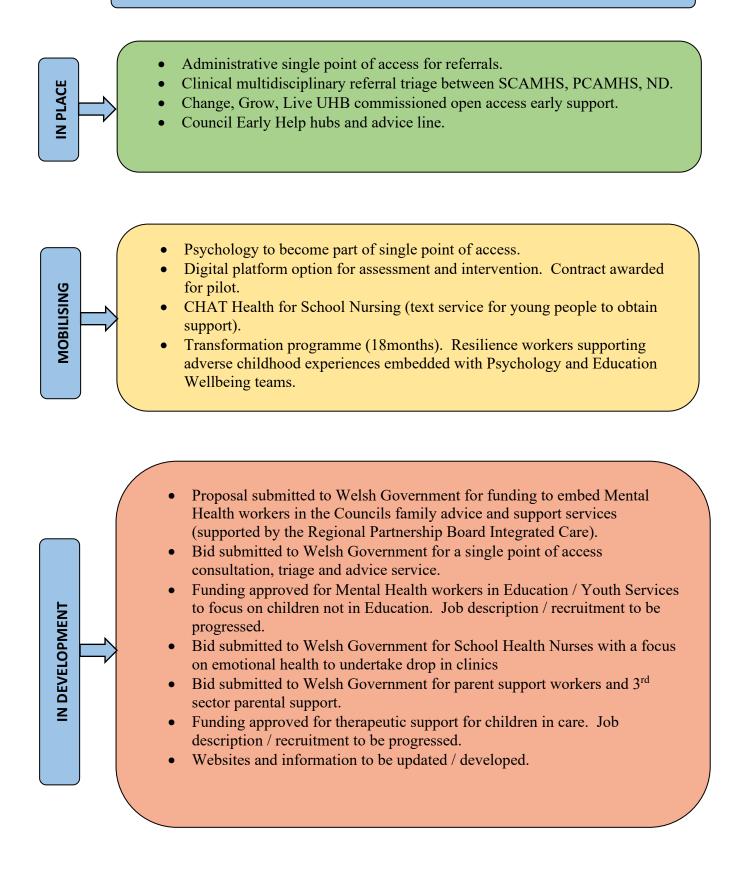
Psychologically led universal work with Education wellbeing teams and schools, building ACE aware behavioural approaches through Transformation (T1). A Psychology led therapeutic and evidence based intervention service for children on the 'edge of care', 'in care' and those in the adoption system, working in partnership with Social Services and Education.

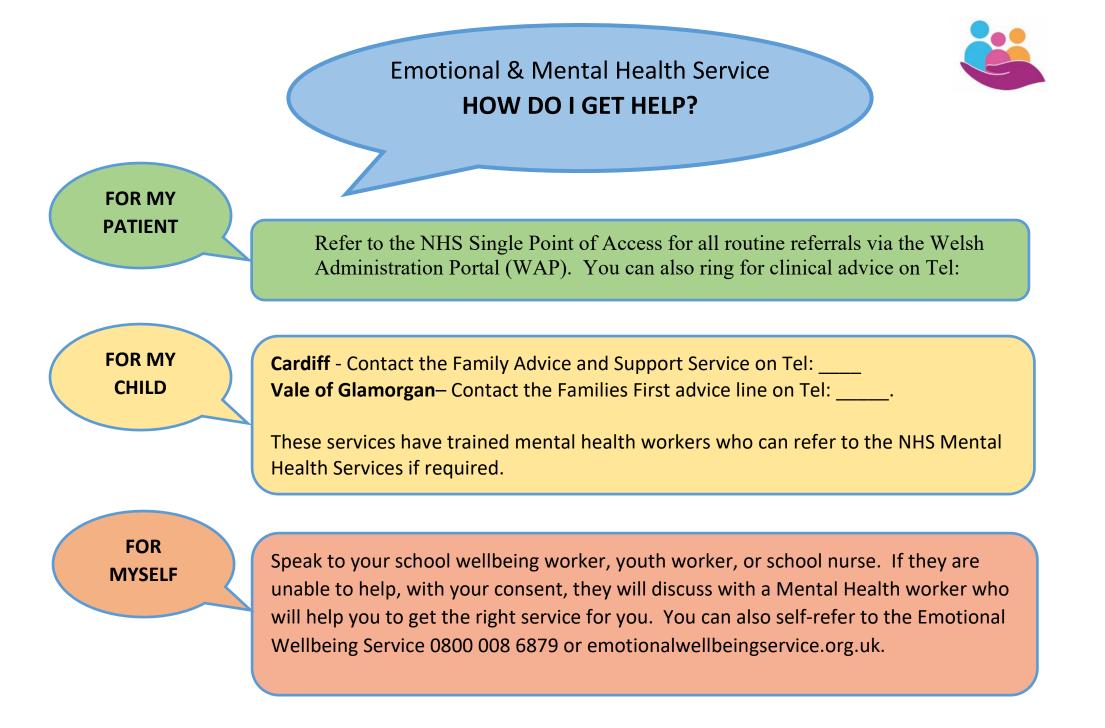
Appendix 2 - Service Model





PROGRESS TOWARDS DELIVERY





Appendix 2

